

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001546

FILED  
Apr 21, 2007  
Secretary of State

**Entity Name:** MASTERS RESERVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4980 TAMIAMI TRL. N. #101  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

4980 TAMIAMI TRL. N. #101  
NAPLES, FL 34103

**New Mailing Address:**

COLLIER FINANCIAL, INC.  
4985 TAMIAMI TRAIL E.  
NAPLES, FL 34113

**FEI Number:** 59-3740488

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STOCK COMMUNITY SERVICES, LLC  
4980 TAMIAMI TRL. NORTH #101  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CAMPKIN, GERRY  
Address: 6920 BENT GRASS DRIVE  
City-St-Zip: NAPLES, FL 34113

Title: VP ( ) Delete  
Name: WALDMAN, IRVING  
Address: 6935 AMEN CORNER CT.  
City-St-Zip: NAPLES, FL 34113

Title: DST ( ) Delete  
Name: MESSINA, MARK  
Address: 6707 CROWNED EAGLE LANE  
City-St-Zip: NAPLES, FL 34113

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CAMPKIN, GERRY  
Address: 6920 BENT GRASS DRIVE  
City-St-Zip: NAPLES, FL 34113

Title: D (X) Change ( ) Addition  
Name: WALDMAN, IRVING  
Address: 6935 AMEN CORNER CT.  
City-St-Zip: NAPLES, FL 34113

Title: VD (X) Change ( ) Addition  
Name: KAPPAZ, EDWARD  
Address: 6963 AMEN CORNER COURT  
City-St-Zip: NAPLES, FL 34113

Title: TD ( ) Change (X) Addition  
Name: KUNZ, JANICE  
Address: 6801 BENT GRASS DR  
City-St-Zip: NAPLES, FL 34113

Title: SD ( ) Change (X) Addition  
Name: WILSON, KAY  
Address: 6965 BENT GRASS DRIVE  
City-St-Zip: NAPLES, FL 34113

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERRY CAMPKIN

PD

04/21/2007

Electronic Signature of Signing Officer or Director

Date